									Application or Docket Number					
	PATENT A	PPLICATIO	N FEE DE	TERM	IINATIO	ON RECO	RD	•		1				
Effective October 1, 2000 09 76661												6(0		
CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN			
	- 1 1 1 1 1		(Column	1)	(Column 2)			TYPE C		□ OR		SMALL ENTITY		
то	TAL CLÁIMS		28					RAT	_	FEE		RATE	FEE	
FOR 0123 01			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			∂8 minus 20⇒		8		ļ	X\$ 9)=		OR	X\$18=	144	
INDEPENDENT CLAIMS			6 minus 3 =		3			X40	=		OR	X80=	240	
WU	LTIPLE DEPEN	RESENT	ESENT				+13!	=		OR	+270=			
* If the difference in column 1 is less than zero, enter "O" in column 2								TOT	AL		OR	TOTAL	1094	l
CLAIMS AS AMENDED - PART II									-	_	-	OTHER		
<u>09</u>	124 0	(Ookariin I)	er granestere	(Colu				SMALL			OR	SMALL		
MTA		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	BER OUSLY FOR	PRESENT EXTRA		RAT	E.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 24	Minus	. 7	28:	- 60		XS 9	2		OR	X\$18=		
ME	Independent	. 6	Minus		6	- 4		X40	3		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+135	Ð		OR	+270=		
									TAL		OR	YOTAL	20	1
	126/0	>5		(Coh	mn 2)	(Column 3)		ADDIT	FEE		10	ADDIT. FEE		1
		CLAIMS		HIG	REST		1			ADDI-			ADDI-	ł
E		REMAINING AFTER		PREV	IBER IOUSLY	PRESENT EXTRA		RAT	E	TIONAL		RATE	TIONAL	1
É		AMENDMENT			7 (2)			100.0	\exists	FEE		V010	FEE	i
AMENDMENT	Total Independent	- 65	Minus	- (7	• •		X\$ 8	_		OR	X\$18=		ł
돌		PRESENTATION OF MULTIPLE DEPENDE			T CLAIM			X40=			OR	X80=		l
_								+135	.		OR	+270=		
٠	00/1-1		•			• • •	,	TO ADDIT.	TAL		OR	YOTAL ADDIT, FEE	4	
C	08/15/9	(Column 1)		(Celu	mn 2)	(Column'3)								l
6		CLAIMS			HEST 48ER	PRESENT	1			ADD1-	٠		ADDI-	1
E		AFTER AMENDMENT		PREV	FOR	EXTRA		RAT	E	TIONAL FEE		RATE	TIONAL FEE	1.
N N	Total	. 23	Minus	7	3	· 0		X\$ 9		4.69	OR	X\$18=		
AMENDMENT	Independent	. 6	Minus	•••	6.	.0		X40			OR	X80=		1
۲	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135				+270=	<u> </u>	1
	II the entry in colu	enn 1 is less than t	the entry in oak	יייים 2, writ	te "O" in co	tumn 3.			TAL		OR	TOTAL	A	ł
If the entry in column 1 is less than the entry in column 2, write "of in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE The "Highest Number Previously Paid For" (Total or independent) is the highest number than appropriate box in column 1.														1
	The Highest Nur	nber Proviously Pa	id For (Total o	r indepen	denij is Di	Nghest numbe	n kiji	कार्य सिंह सा	e eth	od stai uquu	in co	Dame 1.	•••	
	M DTO 475					4::	<u> </u>		_	nart Office. U			20	-